Antigen	Reported coverage levels (in%age)
Diptheria, Pertussis Tetans (DPT)	98%
Oral Polio Vaccin (OPV)	99%
Vaccin for prevention of Tuberculosis (BCG)	97%
Measles	89%
Tetanus Toxoied for pregnant women TT (PW)	78%

India among dirtiest in world

2838. SHRI N. E. BALARAM;

SHRI GURUDAS DAS GUPTA;

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news item under the caption "India among dirtiest in world" which appeared in the "Patriot" dated 11th November, 1991; and

(b) if so, what are the details in this regard and what is Government's reaction thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA-DEVI SIDDHARTHA): (a) Yes, Sir.

(b) It is a fact that sanitary conditions in our cities and towns are not ideal and there is much scope for improvement. Sanitation is primarily a State subject and it is the responsibility of State Governments/UTs and Urban local bodies to plan and maintain sanitation schemes. However, the Central Government also supplements the efforts of the State Governments/UTs

Under the International Drinking Water Supply and Sanitation Decade Programme from 1981—90, coverage of sanitation in urban areas till the end of December, 1990 was 45.9 per cent (Provisional).

During the 8th Five Yea$_r$ Plan, there is a scheme for the elimination of manual scavenging in the country to the maximum extent possible. This will be achieved by conversion of dry latrines/construction of low cost waterseal pour flush latrine$_s$ at the rate of 500 towns per annum, on whole-town basis. The scheme is being operated through HUDCO by providing a mix of central assistance in the form of subsidy and loan from HUDCO to State Governments/UTs.

The Central Government have also circulated a package proposal to the State Govts, and UTs for implementing pilot projects for solid waste management over a period of three years and on cost sharing basis by the Central and the State/local bodies in the ratio of 50:50.

विदेशी सहायता से परिवार कल्याण कार्यक्रम

2839. श्री ईश दत्त यादव : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) उत्तर प्रदेश में ऐसे कितने स्थान हैं जहां विदेशी सहायता से स्वास्थ्य एवं परिवार कल्याण कार्यक्रम चलाए जा रहे हैं तथा उन जिलों का ब्यौरा क्या है जहां ये स्थित हैं ;

(ख) इस कार्यक्रम के अंतर्गत किए जा रहे कार्य का ब्यौरा क्या है ;

(ग) क्या यह सच है कि उपयुक्त कार्य योजनाबद्ध ढंग से किया जा रहा है ; और

(घ) यदि नहीं, तो उसके क्या कारण हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारादेवी सिद्धार्थ : (क) से (घ) सूचना एकत्र की जा रही है और सभा पटल पर रख दी जाएगी ।

Increase in population

2840. SHRI DINESHBHAI TRIVED1: WiU the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what was the total population of the country during the last five years, year-wise and the percentage of increase registered every year during the same period; and

(b) to what extent The steps taken in Government have checked the growth of population in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) The population counts are available through census conducted once every decade. As pe_r the latest census figures available the population of the Country was 683.3 million in 1981 and 844.3 million in 1991 showing an average annual exponential growth rate of 2.1 per cent.

(b) The annual Growth Rats of population based on different censuses, which was continuously rising ill 1981 has shown a downward trend in 1991 census. The annual exponential growth rate declined from 2.22 per cent during 1971—81 to 2.11 per cent (provisional) during 1981—91.

Condition of GT8 Hospital

2841. SHRI RAJUBHAI A. PARMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news item which appeared in the Stateman of 6th November, 1991 under the caption 'Sicker Patients, Sicker Hosptial';

(to) if so, what is Government's reaction thereto and the details of steps taken/ proposed to be taken to streamline the GTB Hospital, Delhi; and

(c) what steps are being taken/proposed' to be taken to provide proper and adequate medical/health care facilities to Trans-Yamuna areas?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) and (b) Yes, Sir. Guru Teg Bahadur Hospital is a new institution under the Delhi Administration; the University College of Medical Sciences from where the teaching faculty is drawn, is under Delhi University. For coordination, joint meetings of the hospital staff and university teachers have been held and steps to improve tht working of the hospital have been initiated in all areas, including discipline, cleanliness, availability of staff and equipments.

(c) Medical Faciliies have been provided in the Trans-Yamuna area by Delhi Administration/M.C.D., Central Government, various statutory bodies and voluntary Organisations. At present there are eight hospitals twenty four maternity and child welfare centres, three sub-centres seventy-four dispensaries one poly-clinic, sixteen school health clinics, and ten family welfare centres in the Trans-Yamuna area. In addition, thiriy-iour dispensaries, one polyclinic, thirteen school health clinics and one specialist referral centre are operating at Dilshad Garden. in Khichripur, 100 beded Lal Bahadur Shastri Hospital under the Delhi Admn. is under completion and OPD services are scheduled to be started shortly.